Sacramento County Health Authority Commission

Managed Care Plan Request for Qualifications (RFQ) Timeline and Process

Purpose

The Sacramento County Health Authority Commission was established to serve the public interest of Medi-Cal beneficiaries in the county, and strive to improve health care quality, to better integrate the services of Medi-Cal managed care plans and behavioral health and oral health services, to promote prevention and wellness, to ensure the provision of cost-effective health and mental health care services, and to reduce health disparities.

Per Chapter 2.136 of the Sacramento County Code, the Sacramento County Health Authority Commission shall designate to the California Department of Health Care Services a number of Knox-Keene licensed health plans for the Board of Supervisors' approval for purposes of the Medi-Cal managed care plan procurement.

The following timeline provides an overview of the Commission's process for vetting and selecting managed care plans. This timeline and process was approved by the Commission at its July 29, 2021 special meeting, and may be subject to change.

Timeline and process

Date	Milestone
August 2021	Finalize process, timeline, and ad-hoc committee and external reviewer scoring process
	Review, finalize and adopt RFQ questions
	Assess individual Commission member availability and interest in participating in ad-hoc committee review process, and make recommendations for external reviewers
September 2021	Release RFQ to plans
	Finalize external reviewers, ad-hoc committee members, and scoring tool
	Review results of Consumer Protection Committee Patient and Provider Survey; opportunity for plans to respond to survey results in a panel response format
October 2021	Plan RFQ response due
	Review of publicly available plan quality data; opportunity for plans to respond to quality data in a panel response format

Date	Milestone
November 2021	 Reviewers finish and submit scores to Commission staff for aggregation; ad-hoc committee reviews external reviewers' scoring and ratify scores Conduct plan interviews
December 2021	 Conduct second round interviews with plans or opportunity for plans to make comments (optional) Commission reviews aggregate scores and makes final plan selections Selections sent to County Board of Supervisors (BOS) for review and approval
January 2022	 County BOS approves final plan selections County sends letters of support to plans for inclusion in MCP proposals to DHCS

Review Process

The Commission will convene an ad-hoc committee to oversee the review and assessment process. This ad-hoc committee will be comprised of no more than nine (9) Commissioners. The Commission will review the appointment process in August and ad-hoc committee members will be appointed in September.

The ad-hoc committee will oversee the review and assessment process, which will be conducted by a panel of technical experts, per County Counsel advisement. The selection of the technical expert panel (TEP) will also be reviewed by the Commission in August, with the final selection of the TEP in September.

Next Steps

The Commission will review, finalize, and approve the RFQ during its August meeting(s). The final RFQ will be released in September for managed care plan response as outlined in the timeline above.